

GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF MOTOR VEHICLES Compliance Administration Washington, DC 20002



GUIDELINES FOR FILING A MOTION TO SCHEDULE/RESCHEDULE A HEARING

This form (Motion) is used to request the scheduling or rescheduling of a hearing for a minor moving violation if:

- you failed to respond to the ticket within the 60 calendar days allowed by law, or
- you failed to appear on the scheduled hearing date and were found liable based on the testimony of the issuing officer, or
- you failed to appear for your scheduled hearing twice.

To be considered for a new hearing, you must show "good cause" for the missed appearance or for your failure to respond timely. Examples of good cause include, but are not limited to:

- Incarceration
- Medical Emergency
- Death of an immediate family member
- Unexpected out-of-state travel

You must submit relevant documentation to support your Motion such as prison release papers, hospital admission records, funeral programs or airline tickets.

You may fax your Motion along with your supporting documents to (202) 727-3768, or mail them to: DC Department of Motor Vehicles, Adjudication Services, Scheduling Unit, 65 K Street, NE, Washington, DC 2002. The hours of operation are Monday through Friday from 8:00am to 4:30pm.

To determine if your Motion was granted, you may call (202) 535-1440 after 10:00am the business day after you file your Motion.

If a hearing examiner denies your Motion, you must appeal the examiner's decision within 15 calendar days to the Traffic Adjudication Appeals Board for further consideration.

Appeal forms are available at 65 K Street or on the DMV website.

For additional information, call (202) 727-5000 or visit our website: www.dmv.dc.gov



MOTION TO SCHEDULE/RESCHEDULE A HEARING



If you wish to schedule or reschedule a hearing, please complete the section below.

Name:	
Address:	
Phone Number: Work:	Home:
Driver's License Number:	Expiration Date:
Ticket Number(s):	
missed appearance or for his or her failure to an MOTION TO SCHEDULE OR RESCHEDULE	
Request for expedited response. Please of	attach supporting documentation detailing why an expedited
response is necessary.	
Signature:	Date:
DMV Use Only	
Request to schedule or reschedule:	Granted Denied